REMARKS

The Office Action mailed March 11, 2004 and reference cited therein have been reviewed. In an effort to place the claims in allowable form, Applicant has, by this amendment, canceled claims 77, 94 and 95 and amended claims 73, 82 and 97.

Claims 73-79 and 81-97 were rejected under 35 U.S.C. §103(a) as being unpatentable over Israel in view of Fearnot '629. Claims 80, 98 and 99 were rejected under 35 U.S.C. §103(a) as being unpatentable over Israel in view of Fearnot '629 and March '250.

Applicant submits that none of the references of record disclose, teach or suggest an expandable intraluminal graft for use within in a body passageway that includes 1) a body member design that results in the body member having substantially the same longitudinal length when the body member is in its first cross-sectional shape and in its said second expanded cross-sectional shape and 2) a body member having smooth ends.

Israel was cited to disclose a stent that does not shrink; however, Israel discloses that the stent shrinks on expansion. Israel discloses that the stent design minimizes shrinkage, but shrinks nonetheless. The stent defined in the pending claims is disclosed as having substantially no shrinkage during expansion. Several stent designs to accomplish this significant advantage over prior art stents and a detailed explanation of the many benefits for such a stent configuration are disclosed in Applicant's specification.

Israel was also cited to disclose a stent having smooth ends 17. A review of Israel reveals that there is no disclosure nor teaching concerning smooth or non-smooth surfaces. The figures tend to indicate that the edges may be straight and potentially sharp. The stent defined in the pending claims requires the two ends of the stent to be smooth. The advantages of such a stent design over prior stents is also disclosed in Applicant's specification.

Israel was further cited as disclosing a medicine coated on the stent. However, this is not what is taught by Israel. Israel teaches that a medicine can be "embedded" in the stent. This embedding of the medicine apparently is within the hollow central cavity of the stent. There is no disclosure of coating the stent with any type of medicine.

The examiner acknowledges that Israel does not disclose a biological agent such as Trapidil and an intermediate compound used to secure the Trapidil to the stent. As a result, Fearnot is cited to overcome such deficiencies. Applicant submits that neither Fearnot nor March overcome the deficiencies of Israel as set forth above. Applicant maintains that the combined features of the stent defined in the pending claims are not disclosed, taught nor suggested by the cited art of record.

Respectfully submitted,

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